(New Nonprovisional Applications Under 37 CFR § 1.53(b))

RUW-1001

TO THE ASSISTANT COMMISSIONER FOR PATENTS:

Transmitted herewith is the patent application of () application identifier or (X) first named inventor, Mary Ruwart, entitled

COMPOSITIONS AND ME	THODS FOR THE TREA	TMENT OF RADIATI	ON BURNS AND OTH	<u>ER TRAUMATIC SKIN</u>		
CONDITIONS, for a(n):	ion					
(x) Original Patent Applicat() Continuing Application		idoned):				
	() Divisional ((CIP)			
of prior Applic	ation No,	filed on	<u> </u>			
() A statement cl	aiming priority under 35 U	JSC § 120 has been add	led to the specification.			
Enclosed are: (X) Specification; 25 Total Pages. (X) Drawing(s); 0 Total Sheets. () Oath or Declaration: () A Newly Executed Combined Declaration and Power of Attorney: () Signed. () Unsigned. () Partially Signed. () A Copy from a Prior Application for Continuation/Divisional (37 CFR § 1.63(d)). () Incorporation by Reference. The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied, is considered as being part of the disclosure of the accompanying application and is hereby incorporated herein by reference. () Signed Statement Deleting Inventor(s) Named in the Prior Application. (37 CFR § 163(d)(2)). () Power of Attorney. (X) Return Receipt Postcard. () Associate Power of Attorney. () A Check in the amount of \$ for the Filing Fee. () Preliminary Amendment. () Information Disclosure Statement and Form PTO-1449. () A Certified Copy of Priority Documents (if foreign priority is claimed).						
() Other:	() Applicant claims small entity status. () Other:					
	,	CLAIMS AS FILED				
FOR	NO. FILED	NO. EXTRA	RATE	FEE		
Total Claims	29	9	\$9.00	\$81.00		
Independent Claims	ependent Claims 5		\$43.00			
Multiple Dependent Claim Fee (\$0.00					
Assignment Recording Fee (if applicable) \$0.00						
Basic Filing Fee \$385.00						
	\$552.00					
Please charge \$ 552.00 to Deposit Account No. 50-1726 pursuant to 37 CFR § 1.25. At any time during the pendency of this application, the Commissioner is hereby authorized to charge any fees required or credit any overpayment to this Deposit Account. A duplicate copy of this sheet is enclosed for fee processing against this Deposit Account.						
Respectfully submitted By: Nancy Johnson, Attorney	"Express Mail I	I hereby certify that this is being deposited with the U.S. Postal Service "Express Mail Post Office to Addressee" service under 37 CFR § 1.10 on the date indicated below and is addressed to:				
Date:		Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231				
Correspondence Address:	•			By: A Nov		
Nancy Lord Johnson, Ltd 361 South Frontage Rd. S			Nancy Johnson			
Pahrump, NV 89048 Phone: 775-751-3636 Fax: 775-582-1301	Express Mail L	Express Mail Label No.: ER978790779US				
14A. //J-J02-13U1	Date of Deposi	Date of Deposit: 4/13/04				

TOT

nder the Paperwork Reduction Act of 1995, no persons are required to
FEE TRANSMITTAL
for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

AL AMOUNT OF PAYMENT	(\$) 552.00

U.S. Patent and T	PTO/SB/17 (01-03) Approved for use through 04/30/2003. OMB 0651-032 rademark office: U.S. DEPARTMENT OF COMMERCE ormation unless it displays a valid OMB control number
	Complete if Known
Application Number	
Filing Date	4/9/2004
First Named Inventor	Ruwart
Examiner Name	unassigned
Art Unit	
	unassigned
Attorney Docket No.	RUW-1001

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)				
Check Credit Card Money Other None		DDITION Entity		EES Entity	_	- "
X Deposit Account		Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
LX Deposit Account	Code 1051	130	2051	65	Surcharge - late fling fee or oath	
Deposit Account Number		50	2052	25	Surcharge - late provisional filing fee or cover sheet	
Deposit Account Name Name Name		130	1053	130	Non-English specification	
The Commissioner is authorized to: (check all that apply)	1812	2,520	1812	2,520	For filing a request for ex parte reexamination	[
Charge fee(s) indicated below Credit any overpayments	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
Charge any additional fee(s) during the pendency of this application	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
Charge fee(s) indicated below, except for the filing fee	1251	110	2251	55	Extension for reply within first month	
to the above-identified deposit account.	1252	410	2252	205	Extension for reply within second month	
FEE CALCULATION	1253	930	2253	465	Extension for reply within third month	
1. BASIC FILING FEE		1,450	2254	725	Extension for reply within fourth month	
Large Entity Small Entity	1255	1,970	2255	985	Extension for reply within fifth month	
Fee Fee Fee Fee Description Code (\$) Code (\$)	1401	320	2401	160	Notice of Appeal	
1001 750 2001 375 Utility filing fee 385	1402	320	2402	160	Filing a brief in support of an appeal	
1002 330 2002 165 Design filing fee	1403	280	2403	140	Request for oral hearing	
1003 520 2003 260 Plant filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1004 750 2004 375 Reissue filing fee	1452	110	2452	55	Petition to revive - unavoidable	
1005 160 2005 80 Provisional filing fee		1,300	2453	650	Petition to revive - unintentional	
SUBTOTAL (1) \$ 385	1501	1,300	2501	650	Utility issue fee (or reissue)	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1502	470	2502	235	Design issue fee	
Fee from Extra Claims below Fee Paid	1503	630	2503	315	Plant issue fee	
Total Claims 29 -20**= 9 X 9 = 81	1460	130	1460	130	Petitions to the Commissioner	
Independent 5 -3**= 2 X 43 = 86	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
Muttiple Dependent =	1806	180	1806	180	Submission of Information Disclosure Stmt	
Large Entity Small Entity	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
Fee Fee Fee Fee Code (\$) Fee Description	1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))	
1202 18 2202 9 Claims in excess of 20 1201 84 2201 42 Independent claims in excess of 3	1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))	
1203 280 2203 140 Multiple dependent claim, if not paid 1204 84 2204 42 **Reissue independent claims over original patent	1801	750	2801	375	Request for Continued Examination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application	
SUBTOTAL (2) (\$) 167		fee (speci	ify)			
**or number proviously paid if greater For Reissues, see above		uced by Ba	sic Filin	a Fee Pa	subtotal (3) (\$)	

SUBMITTED BY Complete (if applicable)						
Name (Print/Type)	Nancy Johnson	Registra (Attorne	ation No. ty/Agent) 45462	Telephone	775-751-3636	
Signature	1/A LIAh	me		Date	4-13-04	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization of PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 37 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete his form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

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April 13, 2004

Mail Stop New Apps Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Re: Application Number: unassigned

Inventor: Mary J. Ruwart

Dear Sir:

Attached Please Find the Following:

Specification 19 pages Claims 5 pages Abstract 1 page

Declaration and Power of Attorney

Transmittal
Fee Transmittal
Return Reciept Postcard
Express Mail Receipt

If payment Enclosed, this Amount Is Believed to Be Correct; However, the Commissioner Is Hereby Authorized to Charge Any Deficiency or Credit Any Overpayment to Deposit Account No 50-1726.

Sincerely,

Nancy Johnson

Cc: Mary Ruwart